| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF MICHIGAN | - | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Vernon | |
| | your government-issued picture identification (for example, your driver's | First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | Nichols | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-6928 | |

Debtor 1 Vernon Nichols Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 54 Glynn Ct. | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Wayne County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| | otor 1 Vernon Nichols | | | | Case number (if known) |
|-----|---|------------|----------------------------|--|--|
| | | | | | |
| Par | t 2: Tell the Court About | our Bankı | ruptcy Ca | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | | of description of each, see <i>Notice Required</i> to the top of page 1 and check the approp | by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy riate box. |
| | choosing to me under | Chapt | er 7 | | |
| | | ☐ Chapt | er 11 | | |
| | | ☐ Chapt | er 12 | | |
| | | ☐ Chapt | er 13 | | |
| 8. | How you will pay the fee | abo ord | out how yo | may pay. Typically, if you are paying the fee orney is submitting your payment on your b | neck with the clerk's office in your local court for more details by yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with |
| | | | | | ption, sign and attach the Application for Individuals to Pay |
| | | | • | n Installments (Official Form 103A). | otion only if you are filing for Chapter 7. By law, a judge may, |
| | | but app | is not requ lies to you | ed to, waive your fee, and may do so only if amily size and you are unable to pay the fe | f your income is less than 150% of the official poverty line that see in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition. |
| 9. | Have you filed for | ■ No. | | | |
| | bankruptcy within the last 8 years? | ☐ Yes. | | | |
| | last o years: | □ res. | District | When | Case number |
| | | | District | When | Casa awahan |
| | | | District | When | Case number Case number |
| | | | District | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | |
| | | | Debtor | | Relationship to you |
| | | | District | When | Case number, if known |
| | | | Debtor | | Relationship to you |
| | | | District | When | Case number, if known |
| 11. | Do you rent your | ■ No. | Go to li | 12. | |
| | residence? | ☐ Yes. | Has yo | landlord obtained an eviction judgment aga | ainst you? |
| | | 55. | | o. Go to line 12. | • |
| | | | | es. Fill out <i>Initial Statement About an Evicti</i> is bankruptcy petition. | on Judgment Against You (Form 101A) and file it as part of |

| Deb | tor 1 Vernon Nichols | | | | Case number (if known) |
|-----|---|-----------------------|----------------|--|---|
| | | | | | |
| ar | Report About Any Bu | ısinesses | You Owr | as a Sole Proprie | tor |
| 2. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | siness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | oer, Street, City, Sta | te & ZIP Code |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | e |
| 3. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you ir | ndicate that you are ow statement, and f | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am ı | not filing under Chap | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| | | | | | |
| ar | t4: Report if You Own or | Have Any | / Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| 4. | Do you own or have any property that poses or is | ■ No. | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | |
| | | | | | Number, Street, City, State & Zip Code |
| | | | | | |
| | | | | | |

Debtor 1 Vernon Nichols

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Vernon Nichols | | | Case number (if k | known) |
|-----|--|----------------------------|-----------------------------------|--|--|
| Par | t 6: Answer These Questi | ons for Repo | rting Purposes | | |
| 16. | What kind of debts do you have? | | | imer debts? Consumer debts are defined , family, or household purpose." | in 11 U.S.C. § 101(8) as "incurred by an |
| | | | No. Go to line 16b. | | |
| | | • | Yes. Go to line 17. | | |
| | | | | ess debts? Business debts are debts that ent or through the operation of the busines | |
| | | | No. Go to line 16c. | | |
| | | | Yes. Go to line 17. | | |
| | | 16c. Sta | ate the type of debts you owe t | hat are not consumer debts or business de | ebts |
| 17. | Are you filing under Chapter 7? | □ No. la | m not filing under Chapter 7. G | Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and | are are | e paid that funds will be availab | ou estimate that after any exempt property ple to distribute to unsecured creditors? | is excluded and administrative expenses |
| | administrative expenses are paid that funds will | | No | | |
| | be available for distribution to unsecured creditors? | | Yes | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | 2 5,001-50,000 |
| | you estimate that you owe? | 50-99 | | ☐ 5001-10,000 | 50,001-100,000 |
| | | □ 100-199 □ 200-999 | | □ 10,001-25,000 | ☐ More than100,000 |
| 19. | How much do you | \$ 0 - \$50,0 | 000 | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | □ \$50,001 - | | \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion |
| | | □ \$100,001 □ \$500,001 | | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$50,0 | 000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | \$50,001 | | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion |
| | | □ \$100,001 □ \$500,001 | | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| | | — \$500,001 | - \$1 Hillion | | |
| Par | Sign Below | | | | |
| For | you | I have exami | ned this petition, and I declare | under penalty of perjury that the information | on provided is true and correct. |
| | | | | m aware that I may proceed, if eligible, und available under each chapter, and I choos | |
| | | | | ay or agree to pay someone who is not an tice required by 11 U.S.C. § 342(b). | attorney to help me fill out this |
| | | I request reli | ef in accordance with the chap | ter of title 11, United States Code, specified | d in this petition. |
| | | bankruptcy cand 3571. | ase can result in fines up to \$2 | cealing property, or obtaining money or pro 250,000, or imprisonment for up to 20 years | |
| | | Vernon Nic Signature of | hols | Signature of Debtor 2 | |
| | | Executed on | December 9, 2019 | Executed on | |
| | | | MM / DD / YYYY | MM / DI | D/YYYY |

| Debtor 1 | Vernon Nichols | | Case number (if known) | |
|----------|----------------------|---|---|----------------------------------|
| | | | | |
| For your | attorney, if you are | I, the attorney for the debtor(s) named in this petitio | n, declare that I have informed the debtor(| (s) about eligibility to proceed |

represented by one

If you are not represented by an attorney, you do not need to file this page.

under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ JACK BERMAN | Date | December 9, 2019 |
|--|---------------|------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| JACK BERMAN P-10737 | | |
| Printed name | | |
| Berman & Bishop, PLLC | | |
| Firm name | | |
| 24405 Gratiot Ave. | | |
| Eastpointe, MI 48021 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 586-779-6000 | Email address | JackBerman72@gmail.com |
| P-10737 MI | | |
| Bar number & State | | |

Certificate Number: 15317-MIE-CC-033746741



CERTIFICATE OF COUNSELING

I CERTIFY that on November 25, 2019, at 8:34 o'clock AM PST, Vernon J Nichols received from Access Counseling, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Eastern District of Michigan, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: November 25, 2019

By: /s/Glenn Crisostomo

Name: Glenn Crisostomo

Title:

Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

| | 41 | | | | | | |
|------------------|---|--|--|--|--|--------------|-------------------------------|
| | | ation to identify your | case: | | | | |
| Debto | or 1 | Vernon Nichols First Name | Middle Name | Last Name | | | |
| Debto | or 2 se if, filing) | First Name | Middle Name | Last Name | | | |
| ` . | | | EASTERN DISTRICT | | | | |
| Unite | a States Dani | kruptcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | | | |
| Case (if know | number | | | | | _ | if this is an ded filing |
| | | m 106Sum | and Liabilities s | ınd Certain Statistica | l Information | , | 12/15 |
| Be as inforn | complete an nation. Fill ou original form | nd accurate as possibut all of your schedule | le. If two married peopes first; then complete | le are filing together, both are e the information on this form. If ck the box at the top of this pa | equally responsible for you are filing amend | or supplyin | g correct |
| | | | | | | Your as | ssets f what you own |
| | | 3: Property (Official Fo | | | | \$ | 0.00 |
| | 1b. Copy line | 62, Total personal pro | perty, from Schedule A/E | 3 | | \$ | 31,860.00 |
| | 1c. Copy line | 63, Total of all property | on Schedule A/B | | | \$ | 31,860.00 |
| Part 2 | 2: Summai | rize Your Liabilities | | | | | |
| | | | | | | | abilities t you owe |
| | | | aims Secured by Proper nn A, Amount of claim, a | ty (Official Form 106D) at the bottom of the last page of P | art 1 of <i>Schedule D</i> | \$ | 7,333.00 |
| | | | Unsecured Claims (Offic 1 (priority unsecured cla | ial Form 106E/F) ims) from line 6e of <i>Schedule E/F</i> | | \$ | 1,344.00 |
| : | 3b. Copy the | total claims from Part | 2 (nonpriority unsecured | claims) from line 6j of Schedule | E/F | \$ | 87,036.00 |
| | | | | | Your total liabilities | \$ | 95,713.00 |
| Part 3 | 3: Summai | rize Your Income and | Expenses | | | • | |
| | | our Income (Official Fo | | ıle I | | \$ | 2,751.66 |
| | | our Expenses (Official onthly expenses from li | | | | \$ | 2,751.00 |
| Part 4 | 4: Answer | These Questions for | Administrative and Sta | atistical Records | | | |
| | | | er Chapters 7, 11, or 13 on this part of the form. | ? Check this box and submit this fo | rm to the court with yo | ur other sch | nedules. |
| 7. | ■ Yes What kind of | debt do you have? | | | | | |
| | ■ Your de | hts are primarily con | sumer dehts Consume | r dehts are those "incurred by an | individual primarily for | a nersonal | family or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules. Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2 8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,511.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total c | laim |
|--|---------|-----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 1,344.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 57,261.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 58,605.00 |

|)ebt | or 1 | Vernon Nichols First Name | Middle Name Last Name | | |
|-------|-------------------|--|---|--|---|
| ebt | or 2 | Filst Name | Middle Name Last Name | | |
| Spous | e, if filing) | First Name | Middle Name Last Name | | |
| nite | d States Bai | nkruptcy Court for the: EAST | TERN DISTRICT OF MICHIGAN | | |
| ase | number _ | | | | ☐ Check if this is a amended filing |
| | | rm 106A/B | | | |
| C | hedul | e A/B: Propert | у | | 12/15 |
| art 1 | you own or h | nave any legal or equitable intere | , or Other Real Estate You Own or Have an Interest In est in any residence, building, land, or similar property? | | |
| | ☐ res. wi | iere is the property? | | | |
| | | | | | |
| .1 | | | What is the property? Check all that apply | the amount of any se | red claims or exemptions. Put ecured claims on Schedule D: |
| _ | Street address, i | if available, or other description | Single-family home | the amount of any security of the Creditors Who Have | ecured claims on Schedule D: e Claims Secured by Property. |
| - | Street address, i | if available, or other description State ZIP C | ☐ Single-family home ☐ Duplex or multi-unit building | the amount of any so Creditors Who Have Current value of the entire property? | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? |
| - | | | ☐ Single-family home ☐ Duplex or multi-unit building | the amount of any so Creditors Who Have Current value of th | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the |
| - | | | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative | the amount of any so Creditors Who Have Current value of the entire property? | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? |
| - | | | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home | the amount of any so Creditors Who Have Current value of the entire property? | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? |
| - | | | Single-family home Duplex or multi-unit building Code Code Manufactured or mobile home Land Investment property Timeshare | the amount of any so Creditors Who Have Current value of the entire property? | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? |
| - | | | Single-family home Duplex or multi-unit building Code Code Code Code Code Code Code Cod | the amount of any si Creditors Who Have Current value of th entire property? \$ Describe the nature | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? |
| | | | Single-family home Duplex or multi-unit building Code Code Manufactured or mobile home Land Investment property Timeshare | the amount of any si Creditors Who Have Current value of th entire property? \$ Describe the nature | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? s e of your ownership interest e, tenancy by the entireties, of |
| - | | | Single-family home Duplex or multi-unit building Code Code Code Code Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one | the amount of any si Creditors Who Have Current value of th entire property? Describe the natur (such as fee simple | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? s e of your ownership interest e, tenancy by the entireties, of |
| - | | | Single-family home Duplex or multi-unit building Code Code Code Code Code Code Code Code | the amount of any si Creditors Who Have Current value of th entire property? Describe the natur (such as fee simple | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? s e of your ownership interest e, tenancy by the entireties, of |
| - | | | Single-family home Duplex or multi-unit building Code Code Code Code Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any si Creditors Who Have Current value of th entire property? Describe the natur (such as fee simple a life estate), if kno | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? s e of your ownership interest e, tenancy by the entireties, community property |
| - | City | | Single-family home Duplex or multi-unit building Code Code Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another | Describe the nature (such as fee simple a life estate), if known the contraction of the c | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? s e of your ownership interest e, tenancy by the entireties, community property |
| - | City | | Single-family home Duplex or multi-unit building Code Code Code Code Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Describe the nature (such as fee simple a life estate), if known the contraction of the c | ecured claims on Schedule D: e Claims Secured by Property. e Current value of the portion you own? s e of your ownership interest e, tenancy by the entireties, own. |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| 0 | | | | |
|-------|--|--|--|----------------------|
| Cars | s, vans, trucks, tractors, sport utility ve | hicles, motorcycles | | |
| □ N | 0 | | | |
| _ · · | | | | |
| _ ' | es | | | |
| 3.1 | Make: Dodge | Who has an interest in the property? Check one | Do not deduct secured cl | |
| | Model: Charger RT | ■ Debtor 1 only | the amount of any secure Creditors Who Have Clair | |
| | Year: 2014 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 53000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| _ | Other information: | \square At least one of the debtors and another | | |
| l l | when not in use this vehicle is at | ☐ Check if this is community property | \$10,500.00 | \$10,500.0 |
| | Location: 54 Glynn Ct., Detroit MI 48202 | (see instructions) | | |
| 3.2 | Make: Ford | Who has an interest in the property? Check one | Do not deduct secured cl | |
| | Model: Taurus | ■ Debtor 1 only | the amount of any secure Creditors Who Have Clair | |
| | Year: 2007 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 119000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| - | Other information: | \square At least one of the debtors and another | | |
| ı | when not in use this vehicle is at | ☐ Check if this is community property | \$900.00 | \$900.0 |
| | Location: 54 Glynn Ct., Detroit MI 48202 | (see instructions) | <u> </u> | |
| 3.3 | _{Make:} Yamaha | Who has an interest in the property? Check one | Do not deduct secured cl | |
| | Model: YZF R6 | Debtor 1 only | Creditors Who Have Clair | |
| | Year: 1999 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 22000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| - | Other information: when not in use this vehicle is | At least one of the debtors and another | | |
| | at Location: 54 Glynn Ct., Detroit MI 48202 | Check if this is community property (see instructions) | \$1,500.00 | \$1,500.0 ——— |
| 5.4 | Make: Chevrolet | Who has an interest in the property? Check one | Do not deduct secured cl | |
| | Model: Caprice | ■ Debtor 1 only | the amount of any secure Creditors Who Have Clair | |
| | Year: 1988 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 225000 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| _ | Other information: | At least one of the debtors and another | | |
| - 11 | this vehicle is stripped and at McCormick in Detroit | Check if this is community property (see instructions) | \$500.00 | \$500.0 |

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Schedule A/B: Property Official Form 106A/B page 2

| D | ebtor 1 | Vernon Nich | ols Case | e number <i>(if known)</i> _ | |
|----|----------------------|--------------------------------------|---|------------------------------|---|
| | | | | | Do not deduct secured claims or exemptions. |
| 6. | | old goods and f es: Major appliar | urnishings ces, furniture, linens, china, kitchenware | | |
| | Yes. | Describe | | | |
| | | | bedroom set Location: 54 Glynn Ct., Detroit MI 48202 | | \$300.00 |
| 7. | Electron Example | es: Televisions a | nd radios; audio, video, stereo, and digital equipment; computers, printers phones, cameras, media players, games | , scanners; music col | lections; electronic devices |
| | Yes. | Describe | | | |
| | | | two television sets, both are 50 inch, 2 smart phones | | \$350.00 |
| 8. | | | figurines; paintings, prints, or other artwork; books, pictures, or other art oons, memorabilia, collectibles | bjects; stamp, coin, c | or baseball card collections; |
| | ■ No | Describe | | | |
| | □ 1€5. | Describe | | | |
| | Example ■ No □ Yes. | musical instru Describe | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf of | clubs, skis; canoes an | nd kayaks; carpentry tools; |
| | Yes. | Describe | | | |
| | | | SW 9 VE hand gun | | \$300.00 |
| 11 | □ No | | othes, furs, leather coats, designer wear, shoes, accessories | | |
| | | | clothes on person and Location: 54 Glynn Ct., Detroit MI 48202 | | \$600.00 |
| 12 | □ No | | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelr | y, watches, gems, go | ld, silver |
| | | | necklace on person | | \$50.00 |
| _ | | | | | |

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

Official Form 106A/B Schedule A/B: Property page 3

| Debtor 1 | Vernon Nicho | ols | | Ca | ase number (if known) | |
|--|---|---------------------------------|---|---|-------------------------|--------------------------------|
| ☐ Yes. | Describe | | | | | |
| ■ No | • | | • | ot already list, including any health aid | ls you did not list | |
| | | | | | u have attached | \$1,600.00 |
| Part 4: De | escribe Your Financ | ial Asse | ts | | | |
| □ Yes. Describe 14. Any other personal and household items you did no □ No □ Yes. Give specific information 15. Add the dollar value of all of your entries from Part for Part 3. Write that number here | ny of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | |
| Exam □ No | , ,, | , | , | • | en you file your petiti | ion |
| | | | | | Cash | \$30.00 |
| _ | | · | Checking and | Institution name: | | 400.00 |
| | | 17.1. | savings | Huntington Bank | | \$80.00 |
| | | 17.2. | | Michigan First Credit Union | | \$100.00 |
| Exam ■ No | ples: Bond funds, i | | ent accounts with broke | • | | |
| joint v ■ No | venture | rmation | about them | · · · · · · · · · · · · · · · · · · · | including an interes | st in an LLC, partnership, and |
| Negot Non-ri ■ No | tiable instruments i negotiable instrume | rate bo nclude p ents are | nds and other negotia personal checks, cashio those you cannot trans | able and non-negotiable instruments ers' checks, promissory notes, and mone | % % | |
| | , | | | | | |

Official Form 106A/B Schedule A/B: Property page 4

| Deptor | vernon Nichols | | | ase number (if known) | |
|----------------|-------------------------------|---|---|------------------------------|---|
| | | | | | |
| | tirement or pension acco | | | | |
| Ex | camples: Interests in IRA, E | ERISA, Keogh, 401(k | , 403(b), thrift savings accounts, or other per | nsion or profit-sharing plar | IS |
| | No | | | | |
| ■ Y | es. List each account sep | arately. | | | |
| | Ту | rpe of account: | Institution name: | | |
| | 40 | M (Is) | Davis Halding 404/le Thrift F | Na. | \$40.0E0.00 |
| | 40 | 01(k) | Reyes Holding 401(k) Thrift F | 'ian | \$13,650.00 |
| | | | | | |
| | curity deposits and prep | | | | |
| | | | so that you may continue service or use from t, public utilities (electric, gas, water), teleco | | or others |
| | | ianulorus, prepaiu rei | it, public utilities (electric, gas, water), teleco | minumications companies, | or others |
| ■ N | | | Inatitution name or individual. | | |
| ЦΥ | es | | Institution name or individual: | | |
| | | | | | |
| 23 An | nuities (A contract for a pe | eriodic payment of mo | oney to you, either for life or for a number of | vears) | |
| | | onodio paymont of m | oney to you, clarer for me or for a number or | , our o _j | |
| - | - - | name and description | | | |
| <u></u> П | es | iamo ana accomption | • | | |
| | | | | | |
| 24 Inte | erests in an education IR | Δ in an account in a | qualified ABLE program, or under a qual | ified state tuition progra | m |
| | U.S.C. §§ 530(b)(1), 529A(| | quamou / 1222 program, or unuor a quar | mod otato taltion progra | |
| | | . , , , , , , , , , , , , , , , , , , , | | | |
| | res Instituti | on name and descrip | tion. Separately file the records of any interes | sts.11 U.S.C. § 521(c): | |
| | | · | | | |
| | | | | | |
| 25. Tru | usts, equitable or future i | nterests in property | (other than anything listed in line 1), and | rights or powers exercis | sable for your benefit |
| ■ N | • | | (canc. a.a., a, aga, a | ngino or pomoro oxoron | and the year bestern |
| | | tion about them | | | |
| | cs. Give specific information | about them | | | |
| | | | | | |
| 26 Pa t | tents convrights tradem | arks, trade secrets | and other intellectual property | | |
| | | | eeds from royalties and licensing agreement | S | |
| | No. | | , | | |
| | es. Give specific informat | tion about them | | | |
| | • | | | | |
| | | | | | |
| 27. Lic | enses, franchises, and o | ther general intangi | bles | | |
| Ex | camples: Building permits, | exclusive licenses, co | poperative association holdings, liquor license | es, professional licenses | |
| | No | | | | |
| | es. Give specific information | tion about them | | | |
| | | | | | |
| | | | | | |
| Money | or property owed to you | ı? | | | Current value of the |
| | | | | | portion you own? |
| | | | | | Do not deduct secured claims or exemptions. |
| | | | | | Gains of Exemplions. |
| | x refunds owed to you | | | | |
| | | | | | |
| ■ Y | es. Give specific informati | on about them, includ | ding whether you already filed the returns and | the tax years | |
| | | | | | |
| | | | | Federal and State | |
| | | 2019 p | ro rated to date of filing | of Michigan and Citv | \$3,000.00 |
| | | P | | ally GILV | Ţ-,J.00 |

Official Form 106A/B Schedule A/B: Property page 5

| Vernon Nichols | | Case number (if known) | |
|--|---|---|-------------------------|
| | | | |
| 29. Family support | | | |
| _ | alimony, spousal support, child supp | port, maintenance, divorce settlement, property | settlement |
| ■ No | | | |
| ☐ Yes. Give specific information | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 30. Other amounts someone owes | you | | |
| | | enefits, sick pay, vacation pay, workers' compen | sation, Social Security |
| | you made to someone else | | |
| No | | | |
| ☐ Yes. Give specific information | | | |
| | | | |
| | | | |
| 31. Interests in insurance policies | | | |
| | e insurance; health savings account | (HSA); credit, homeowner's, or renter's insuran- | ce |
| ■ No | | | |
| ☐ Yes. Name the insurance compa | any of each policy and list its value. | | |
| | pany name: | Beneficiary: | Surrender or refund |
| | | | value: |
| | | | |
| | | | |
| 2. Any interest in property that is o | | | |
| | g trust, expect proceeds from a life i | insurance policy, or are currently entitled to rece | ive property because |
| someone has died. | | | |
| No | | | |
| ☐ Yes. Give specific information | | | |
| | | | |
| | | | |
| | | | |
| 3. Claims against third parties, wh | | | |
| <u> </u> | nt disputes, insurance claims, or righ | its to sue | |
| ■ No | | | |
| ☐ Yes. Describe each claim | | | |
| | | | |
| | | | |
| 4. Other contingent and unliquidat | ed claims of every nature, includi | ing counterclaims of the debtor and rights to | set off claims |
| ■ No | ou claime of every materies, include | ng counterclaime of the debter and ngme to | out on oldmic |
| ☐ Yes. Describe each claim | | | |
| Tes. Describe each claim | | | |
| | | | |
| | | | |
| 5. Any financial assets you did not | already list | | |
| ■ No | | | |
| ☐ Yes. Give specific information | | | |
| · | | | |
| | | | |
| | | ŗ | |
| 36. Add the dollar value of all of yo | our entries from Part 4, including | any entries for pages you have attached | |
| | | | \$16,860.00 |
| | | L | |
| Part 5: Describe Any Business-Related | l Property You Own or Have an Interes | t In. List any real estate in Part 1. | |
| - | | · | |
| 7. Do you own or have any legal or equ | itable interest in any business-related | property? | |
| No. Go to Part 6. | | | |
| ☐ Yes. Go to line 38. | | | |
| | | - | |
| Official Form 106A/B | Schedule A/B: | Property | page |

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| Debtor 1 Vernon Nichols | Case number (if known) |
|--|--|
| | |
| | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. Accounts receivable or commissions you already earned | |
| □ No | |
| ☐ Yes. Describe | |
| | |
| Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copie | ers, fax machines, rugs, telephones, desks, chairs, electronic devices |
| □ No | |
| Yes. Describe | |
| | |
| | |
| 40. Machinery, fixtures, equipment, supplies you use in business, and too | ols of your trade |
| □ No □ Yes. Describe | |
| Tes. Describe | |
| | |
| 41. Inventory | |
| □ No | |
| ☐ Yes. Describe | |
| | |
| 42. Interests in partnerships or joint ventures | |
| □ No | |
| ☐ Yes. Give specific information about them Name of entity: | % of ownership: |
| realle of entity. | |
| | % |
| 43. Customer lists, mailing lists, or other compilations ☐ No. | |
| ☐ Do your lists include personally identifiable information (as defined in 11 U.S.C | . § 101(41A))? |
| □ No | |
| ☐ Yes. Describe | |
| | |
| 44. Any business-related property you did not already list | <u> </u> |
| | |
| ☐ No ☐ Yes. Give specific information | |
| • | |
| | |
| AS Additional delication of the state of the | |
| 45. Add the dollar value of all of your entries from Part 5, including any for Part 5. Write that number here | |

Official Form 106A/B Schedule A/B: Property page 7

| Debtor ' | 1 Vernon Nichols Case numb | per (if known) |
|------------------|---|---|
| Part 6: | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | |
| 46 Do y | you own or have any legal or equitable interest in any farm- or commercial fishing-related pro | nerty? |
| | No. Go to Part 7. | porty: |
| | Yes. Go to line 47. | |
| | Tes. G0 to line 47. | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | m animals amples: Livestock, poultry, farm-raised fish | |
| □ No | 0 | |
| | 9S | |
| | | |
| | | |
| 48. Cro j | ps—either growing or harvested | |
| | 0 | |
| | es. Give specific information | |
| | | |
| | | |
| 49. Far r | m and fishing equipment, implements, machinery, fixtures, and tools of trade | |
| □ No | 0 | |
| □Ye | es | |
| | | |
| | | |
| 50. Farr | m and fishing supplies, chemicals, and feed | |
| | | |
| | 9 \$ | |
| | | |
| | | |
| 51. Any | farm- and commercial fishing-related property you did not already list | |
| | | |
| | es. Give specific information | |
| | | |
| | | |
| 52. Ad | dd the dollar value of all of your entries from Part 6, including any entries for pages you have a | attached |
| | r Part 6. Write that number here | |
| | | |
| Part 7: | Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| Exa | you have other property of any kind you did not already list? amples: Season tickets, country club membership | |
| ■ No | | |
| ⊔ Y€ | es. Give specific information | |
| | <u> </u> | |
| | | |
| 54. Ad | ld the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 8

Debtor 1 **Vernon Nichols** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$13,400.00 57. Part 3: Total personal and household items, line 15 \$1,600.00 58. Part 4: Total financial assets, line 36 \$16,860.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$31,860.00 Copy personal property total \$31,860.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$31,860.00

| · | First Name | Middle Messes | | |
|---------------------|------------|---------------|-----------|----------------------|
| | | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| Case number | | | | |
| Case number | | | | ☐ Check if this is a |
| | | | | amended filing |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Claim as E | xempt | | | | | | | |
|----|--|---|---------|---|------------------------------------|--|--|--|--|
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | | | | | |
| | ☐ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | | | |
| | ■ You are claiming federal exemptions. 11 l | U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim portion you own | | | Specific laws that allow exemption | | | | |
| | | Copy the value from Check only one box for each exemption. Schedule A/B | | | | | | | |
| | 2014 Dodge Charger RT 53000 miles when not in use this vehicle is at | \$10,500.00 | | \$3,167.00 | 11 U.S.C. § 522(d)(2) | | | | |
| | Location: 54 Glynn Ct., Detroit MI 48202 Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 2007 Ford Taurus 119000 miles when not in use this vehicle is at | \$900.00 | | \$900.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Location: 54 Glynn Ct., Detroit MI 48202 Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 1999 Yamaha YZF R6 22000 miles when not in use this vehicle is at | \$1,500.00 | | \$1,500.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Location: 54 Glynn Ct., Detroit MI 48202 Line from Schedule A/B: 3.3 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 1988 Chevrolet Caprice 225000 miles this vehicle is stripped and at | \$500.00 | | \$500.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | McCormick in Detroit Line from Schedule A/B: 3.4 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | | ount of the exemption you claim eck only one box for each exemption. | Specific laws that allow exemption | | |
|----|--|---|---------|--|------------------------------------|--|--|
| | bedroom set | Schedule A/B | _ | , | 11 U.S.C. § 522(d)(3) | | |
| | Location: 54 Glynn Ct., Detroit MI | \$300.00 | - | \$300.00 | 11 0.0.0. § 322(u)(3) | | |
| | 48202 Line from <i>Schedule A/B</i> : 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | two television sets, both are 50 inch, 2 smart phones | \$350.00 | | \$350.00 | 11 U.S.C. § 522(d)(3) | | |
| | Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | SW 9 VE hand gun Line from Schedule A/B: 10.1 | \$300.00 | | \$300.00 | 11 U.S.C. § 522(d)(5) | | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | clothes on person and Location: 54 Glynn Ct., Detroit MI | \$600.00 | | \$600.00 | 11 U.S.C. § 522(d)(3) | | |
| | 48202 Line from <i>Schedule A/B</i> : 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | necklace on person Line from Schedule A/B: 12.1 | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(4) | | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Cash Line from Schedule A/B: 16.1 | \$30.00 | | \$30.00 | 11 U.S.C. § 522(d)(5) | | |
| | Ellie IIolii osiilodale 702. Tott | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Checking and savings: Huntington Bank | \$80.00 | | \$80.00 | 11 U.S.C. § 522(d)(5) | | |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Checking and savings: Michigan First Credit Union | \$100.00 | | \$100.00 | 11 U.S.C. § 522(d)(5) | | |
| | Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | 401(k): Reyes Holding 401(k) Thrift Plan | \$13,650.00 | | \$13,650.00 | 11 U.S.C. § 522(d)(12) | | |
| | Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Federal and State of Michigan and City: 2019 pro rated to date of filing | \$3,000.00 | | \$3,000.00 | 11 U.S.C. § 522(d)(5) | | |
| | Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covered □ No | 3 years after that for ca | ises fi | • | , | | |
| | ☐ Yes | | | | | | |

| Fill in this inform | ation to identify you | ır case: | | | | |
|--|---|---|----------------|--|--|-------------------|
| Debtor 1 | Vernon Nichols | | | | | |
| Dobtor 2 | First Name | Middle Name L | ast Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name L | ast Name | | | |
| United States Ban | kruptcy Court for the: | EASTERN DISTRICT OF MICHIG | SAN | | | |
| Coop number | | | | | | |
| Case number (if known) | | | | | ☐ Check | if this is an |
| | | | | | _ | ded filing |
| Official Form | 106D | | | | | |
| | | Who Have Claims Se | ecured | by Property | V | 12/15 |
| is needed, copy the number (if known). 1. Do any creditors I No. Check | Additional Page, fill it nave claims secured by this box and submit t | his form to the court with your other so | his form. On | the top of any addition | nal pages, write your na | |
| | all of the information | below. | | | | |
| Part 1: List All | Secured Claims | | | Column A | Column B | Column C |
| for each claim. If mo | ore than one creditor has | more than one secured claim, list the creditos a particular claim, list the other creditors in cal order according to the creditor's name. | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2.1 Capital On | e Auto Finance | Describe the property that secures the | claim: | \$7,333.00 | \$10,500.00 | \$0.00 |
| 3901 Dalla PO Box 25 Plano, TX | 9407 75093 | 2014 Dodge Charger RT 53000 when not in use this vehicle is Location: 54 Glynn Ct., Detroit 48202 As of the date you file, the claim is: Cheapply. Contingent | at : MI | | | |
| Number, Street, | City, State & Zip Code | Unliquidated | | | | |
| Who owes the del | ot? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | | ☐ An agreement you made (such as mor car loan) | rtgage or secu | red | | |
| Debtor 1 and Deb | otor 2 only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| ☐ At least one of the | e debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| Check if this cla | | Other (including a right to offset) | urchase m | oney security rec | orded on title | |
| Date debt was incu | rred <u>2015</u> | Last 4 digits of account number | 2421 | | | |
| | | | | | | |
| | | column A on this page. Write that number | here: | \$7,33 | 33.00 | |
| If this is the last p Write that numbe | • | the dollar value totals from all pages. | | \$7,33 | 3.00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

| | | | | | | | | • | | |
|-------------------------------------|---|---|---|---|---|---------------------------------|--|---|--|--|
| Fill i | n this inforr | nation to identify your cas | se: | | | | | | | |
| Debt | tor 1 | Vernon Nichols | | | | | | | | |
| | | First Name | Middle Name | Last Nam | е | | | | | |
| Debt (Spou | tor 2 se if, filing) | First Name | Middle Name | Last Nam | e | | | | | |
| | | nkruptcy Court for the: E | ASTERN DISTRICT | OF MICHIGAN | | | | | | |
| Office | eu States Da | Tiki upicy Court for the. | ASTERN DISTRICT | OI WICHIGAN | | | | | | |
| Case (if kno | e number _ | | | | | | | | Check if | f this is an |
| | | | | | | | | | amende | |
| ∩ffi | cial Forn | n 106E/F | | | | | | | | |
| | | :/F: Creditors Wh | o Have Unsec | ured Claim | S | | | | | 12/15 |
| any ex Sched Sched left. A | xecutory cont dule G: Execu dule D: Credit ttach the Con and case nur | d accurate as possible. Use F tracts or unexpired leases that tory Contracts and Unexpire ors Who Have Claims Secure tinuation Page to this page. mber (if known). | at could result in a clair d Leases (Official Form d by Property. If more s f you have no informat | n. Also list executo 106G). Do not inclus space is needed, co | ory contracts ude any cred opy the Part | s on Scl ditors w you nee | nedule A/B: I ith partially s ed, fill it out, | Property (Offi secured clain number the e | icial Form ns that ar entries in | n 106A/B) and on re listed in the boxes on the |
| Part | | II of Your PRIORITY Unse | | | | | | | | |
| | _ ′ | ors have priority unsecured c | laims against you? | | | | | | | |
| | ☑ No. Go to F | art 2. | | | | | | | | |
| | Yes. | | | | | 1 | | | | |
| i. | dentify what ty possible, list th | r priority unsecured claims. If pe of claim it is. If a claim has be e claims in alphabetical order a than one creditor holds a partic | oth priority and nonpriori ccording to the creditor's | ty amounts, list that on the name. If you have n | claim here ar | nd show | both priority a | and nonpriority | y amounts | s. As much as |
| (| For an explana | ation of each type of claim, see | the instructions for this for | orm in the instruction | booklet.) | Total | laim | Priority amount | | Nonpriority amount |
| 2.1 | City Of | | Last 4 digits | of account number | 6928 | | \$1,344.00 | \$1 | 100.00 | \$1,244.00 |
| | Revunu 2 Wood | editor's Name le Collections Unit Iward Avenue, Suite 10 MI 48226 | | e debt incurred? | 2013-20 | 17 | | - | | |
| | | treet City State Zip Code | As of the date | you file, the claim | is: Check al | ll that ap | ply | | | |
| | Who incurre | d the debt? Check one. | ☐ Contingen | | | | | | | |
| | Debtor 1 o | only | ☐ Unliquidate | ed | | | | | | |
| | Debtor 2 o | only | ☐ Disputed | | | | | | | |
| | Debtor 1 a | and Debtor 2 only | Type of PRIO | RITY unsecured cla | aim: | | | | | |
| | ☐ At least one of the debtors and another ☐ Domestic support obligations | | | | | | | | | |
| | ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government | | | | | | | | | |
| | Is the claim s | subject to offset? | ☐ Claims for | death or personal in | jury while you | u were ir | ntoxicated | | | |
| | ■ No | | ☐ Other. Spe | | | | | | | |
| | ☐ Yes | | | Income Ta | X | | | | | |
| | | | | | | | | | | |
| Part | 2: List A | II of Your NONPRIORITY | Jnsecured Claims | | | | | | | |
| 3. [| Oo any credito | ors have nonpriority unsecur | ed claims against you? | | | | | | | |
| [| ☐ No. You ha | ve nothing to report in this part. | Submit this form to the o | ourt with your other | schedules. | | | | | |
| ı | Yes. | | | | | | | | | |
| t t | insecured claii | r nonpriority unsecured clain m, list the creditor separately fo or holds a particular claim, list t | r each claim. For each cl | aim listed, identify w | hat type of cla | aim it is. | Do not list cla | aims already i | included ir | n Part 1. If more |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 22

Official Form 106 E/F

Total claim

| Account Services Colls Nonpriority Creditor's Name | Last 4 digits of account number | 1441 | \$931.00 | |
|--|---|--|----------|--|
| 1802 Ne Loop 410 Suite 400 San Antonio. TX 78217 | When was the debt incurred? Opened 10/18 | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | ☐ Student loans | | |
| debt Is the claim subject to offset? ■ No □ Yes | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | |
| | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Other. Specify Collection | Attorney St John Hospital | | |
| Account Services Colls | Last 4 digits of account number | 5155 | \$157.00 | |
| Nonpriority Creditor's Name | When was the debt incurred? | Opened 06/16 | | |
| San Antonio, TX 78217 | mon was the asst mountain. | Opened 60/10 | | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | |
| Vho incurred the debt? Check one. | _ | | | |
| Debtor 1 only | Contingent | | | |
| Debtor 2 only | Unliquidated | | | |
| Debtor 1 and Debtor 2 only | Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community lebt | Student loans | | | |
| s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| ☐ Yes | Other Specify Collection | Attorney St John Hospital | | |
| Account Services Colls | Last 4 digits of account number | 3890 | \$86.0 | |
| Nonpriority Creditor's Name | - - | | * | |
| 1802 Ne Loop 410 Suite 400 San Antonio, TX 78217 | When was the debt incurred? | Opened 09/16 | | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt | | ration agreement or divorce that you did not | | |
| s the claim subject to offset? ■ No | report as priority claims Debts to pension or profit-sharin | a plane, and other similar delta- | | |
| | | o pians, and other similar debts | | |

| 1 Vernon Nichols | | Case number (if known) | |
|--|---|---|----------|
| Atg Credit Nonpriority Creditor's Name | Last 4 digits of account number | 5003 | \$934.00 |
| 1700 W Cortland St Chicago, IL 60622 | When was the debt incurred? | Opened 10/14 Last Active 4/22/15 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| \square Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Collection A Centers | Attorney Concentra Medical | |
| Atg Credit | Last 4 digits of account number | 6815 | \$538.00 |
| Nonpriority Creditor's Name 1700 W Cortland St Chicago, IL 60622 | When was the debt incurred? | Opened 01/16 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane and other circiler debte | |
| ■ No | · · · | | |
| Yes | Other. Specify Centers | Attorney Concentra Medical | |
| Baker College | Last 4 digits of account number | 7156 | \$879.00 |
| Nonpriority Creditor's Name 1500 University Drive Auburn Hills, MI 48326 | When was the debt incurred? | 2012 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Tuition | | |

| Bank Of America Nonpriority Creditor's Name | Last 4 digits of account number | | \$4,671.00 | | |
|---|--|---|------------|--|--|
| Po Box 982238 El Paso, TX 79998 | o, TX 79998 Street City State Zip Code As of the date you file, the claim is: Check all that apply | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | | | | | |
| Debtor 1 only | btor 1 only | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| Yes | Other. Specify Credit Card | <u> </u> | | | |
| Best Buy/cbna | Last 4 digits of account number | 9819 | \$686.00 | | |
| Nonpriority Creditor's Name Po Box 6497 | When was the debt incurred? | Opened 12/17 Last Active 6/14/19 | | | |
| Sioux Falls, SD 57117 Number Street City State Zip Code | As of the date you file, the claim i | is: Chock all that apply | | | |
| Who incurred the debt? Check one. | As of the date you me, the claim? | S. Olleck all that apply | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt | | ration agreement or divorce that you did not | | | |
| Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debte | | | |
| No | · | | | | |
| Yes | Other. Specify Charge Acc | count | | | |
| Cap1/saks | Last 4 digits of account number | 6295 | \$638.00 | | |
| 3455 Hwy 80 West Jackson, MS 39209 | When was the debt incurred? | Opened 01/18 Last Active 11/22/19 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Check if this claim is for a community | Student loans | | | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | |
| ■ No | Debts to pension or profit-sharin | | | | |
| ☐ Yes | Other. Specify Charge Acc | count | | | |

| Last 4 digits of account number | 2113 | \$0.00 |
|---|---|--|
| When was the debt incurred? As of the date you file, the claim i | Opened 2/27/16 Last Active 12/21/18 is: Check all that apply | |
| | | |
| ☐ Contingent | | |
| ☐ Unliquidated | | |
| ☐ Disputed | | |
| ** | d claim: | |
| | | |
| □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | did not |
| Debts to pension or profit-sharing | g plans, and other similar debts | |
| Other. Specify Credit Card | <u> </u> | |
| Last 4 digits of account number | 6295 | \$589.00 |
| When was the debt incurred? | 2017 | |
| As of the date you file, the claim i | is: Check all that apply | |
| | | |
| ☐ Contingent | | |
| ☐ Unliquidated | | |
| ☐ Disputed | | |
| <u></u> | d claim: | |
| ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| <u></u> | o plans, and other similar debts | |
| | | |
| Last 4 digits of account number | 2332 | \$874.00 |
| When was the debt incurred? | Opened 06/16 Last Active 3/18/19 | |
| As of the date you file, the claim i | is: Check all that apply | |
| ☐ Contingent | | |
| ☐ Unliquidated | | |
| ☐ Disputed | | |
| Type of NONPRIORITY unsecured | d claim: | |
| ☐ Student loans | | |
| ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| _ | , | |
| | When was the debt incurred? As of the date you file, the claim is a contingent continuation. | When was the debt incurred? As of the date you file, the claim is: Check all that apply |

| | | 4007 | _ |
|---|---|--|-------------|
| Credit One Bank Na Nonpriority Creditor's Name | Last 4 digits of account number | 1837 | \$0.00 |
| Po Box 98872 Las Vegas, NV 89193 | When was the debt incurred? | Opened 12/17 Last Active 3/09/18 | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| Check if this claim is for a community | Student loans | | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Credit Union Advantage | Last 4 digits of account number | 6928 | \$11,000.00 |
| Nonpriority Creditor's Name 22250 Providence Drive | When was the debt incurred? | 2008 | , |
| Southfield, MI 48075 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | , | э энгэн энгэн эрргу | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | Other. Specify Personal Lo | oan | |
| Dept Of Ed/navient | Last 4 digits of account number | 0116 | \$0.00 |
| Nonpriority Creditor's Name | | | Ψ0.00 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 1/16/13 Last Active 2/22/19 | |
| Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt s the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | ☐ Other. Specify | | |

| Dept Of Ed/navient Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts of Debts of Debts of Debts of Debts of State Claim Subject to offset? No Debts of | \$0.0 |
|--|-------|
| Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| □ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts | |
| Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts | |
| | |
| ☐ Yes ☐ Other. Specify | |
| | |
| Educational | |
| Dept Of Ed/navient Last 4 digits of account number 0103 | \$0.0 |
| Po Box 9635 When was the debt incurred? Opened 1/03/12 Last Active 2/27/19 | |
| Number Street City State Zip Code As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | |
| ■ Debtor 1 only □ Contingent | |
| □ Debtor 2 only □ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only ☐ Disputed | |
| ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community Student loans | |
| debt | |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes ☐ Other. Specify | |
| Educational | |
| Dept Of Ed/navient Last 4 digits of account number 1027 Nonpriority Creditor's Name | \$0.0 |
| Po Box 9635 Wilkes Barre, PA 18773 When was the debt incurred? Opened 10/27/11 Last Active 2/27/19 | |
| Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. | |
| ■ Debtor 1 only □ Contingent | |
| ☐ Debtor 2 only ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only ☐ Disputed | |
| At least one of the debtors and another Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community ■ Student loans | |
| debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes ☐ Other. Specify | |
| Educational | |

| Vernon Nichols | | Case number (if known) | |
|--|--|---|-------|
| Dept Of Ed/navient Nonpriority Creditor's Name | Last 4 digits of account number | 1027 | \$0.0 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 10/27/11 Last Active 2/27/19 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ☐ Other. Specify | | |
| | Educationa | al | |
| Dept Of Ed/navient Nonpriority Creditor's Name | Last 4 digits of account number | 0414 | \$0. |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 4/14/11 Last Active 2/27/19 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □ Yes | Other. Specify | | |
| | Educationa | al | |
| Dept Of Ed/navient | Last 4 digits of account number | 1104 | \$0. |
| Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 11/04/10 Last Active 2/22/19 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify | al | |

| or 1 Vernon Nichols | | Case number (if known) | |
|---|--|---|--------|
| Dept Of Ed/navient Nonpriority Creditor's Name | Last 4 digits of account number | 0412 | \$0.00 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 4/12/12 Last Active 2/27/19 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify | | |
| | Educationa | ıl | |
| Dept Of Ed/navient | Last 4 digits of account number | 1003 | \$0.00 |
| Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 10/03/12 Last Active 2/22/19 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | • | , | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify | | |
| | Educationa | ıl | |
| Dept Of Ed/navient | Last 4 digits of account number | 1009 | \$0.00 |
| Nonpriority Creditor's Name Po Box 9635 | When was the debt incurred? | Opened 10/09/13 Last Active 2/22/19 | |
| Wilkes Barre, PA 18773 Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| ■ Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Unliquidated ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt | _ | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | · | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| □Yes | Other. Specify | | |

| 1 Vernon Nichols | | Case number (if known) | |
|--|--|---|-------|
| Dept Of Ed/navient | Last 4 digits of account number | 1009 | \$0.0 |
| Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 10/09/13 Last Active 2/22/19 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify | | |
| | Educationa | ıl | |
| Dept Of Ed/navient Nonpriority Creditor's Name | Last 4 digits of account number | 1013 | \$0.0 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 10/13/14 Last Active 2/22/19 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | • | , | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ☐ Other. Specify | 31, | |
| _ 100 | Educationa | .l | |
| Dept Of Ed/navient | Last 4 digits of account number | 1013 | \$0.0 |
| Nonpriority Creditor's Name Po Box 9635 | When was the debt incurred? | Opened 10/13/14 Last Active 2/22/19 | |
| Wilkes Barre, PA 18773 | | <u> </u> | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | Contingent | | |
| — Debier 1 only | | | |
| ☐ Debtor 2 only | Unliquidated | | |
| _ | ☐ Disputed | d alaim. | |
| ☐ Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community | ☐ Disputed Type of NONPRIORITY unsecured Student loans | | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt | ☐ Disputed Type of NONPRIORITY unsecured Student loans ☐ Obligations arising out of a sepa | d claim: aration agreement or divorce that you did not | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community | ☐ Disputed Type of NONPRIORITY unsecured Student loans | aration agreement or divorce that you did not | |

| Dfs/webbank | Last 4 digits of account number | 1432 | \$0. |
|--|---|--|--------|
| Nonpriority Creditor's Name Po Box 81607 Austin, TX 78708 Number Street City State Zip Code | When was the debt incurred? As of the date you file, the claim i | Opened 3/24/08 Last Active 2/25/10 is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | fraction agreement of divorce that you did not | |
| ■ _{No} | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Charge Acc | count | |
| Discover Fin Svcs Llc | Last 4 digits of account number | 4752 | \$607. |
| Nonpriority Creditor's Name | | Opened 12/17 Last Active | |
| Pob 15316 | When was the debt incurred? | 6/07/19 | |
| Wilmington, DE 19850 Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | 7.0 0 uuto you, o.u | or chost an anatappy | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | 1 | |
| Dpt Ed/navi | Last 4 digits of account number | 0427 | \$0. |
| Nonpriority Creditor's Name | _ | | |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 4/27/10 Last Active 2/22/19 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt | _ | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | and the second s | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| □Yes | ☐ Other. Specify | | |

| Dot Ed/novi | | 0302 | \$0.00 |
|--|---|--|----------|
| Dpt Ed/navi Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 3/02/10 Last Active 2/22/19 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community debt | Student loansObligations arising out of a sepa | ration agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | , | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify | | |
| | Educationa | <u> </u> | |
| First Federal Credit C | Last 4 digits of account number | 6399 | \$128.00 |
| Nonpriority Creditor's Name 24700 Chagrin Blvd Cleveland, OH 44122 | When was the debt incurred? | Opened 04/16 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| \square Check if this claim is for a community | ☐ Student loans | | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Collection | Attorney Malouf Dds Pc Sam | |
| First Federal Credit C | Last 4 digits of account number | 3265 | \$70.00 |
| Nonpriority Creditor's Name 24700 Chagrin Blvd Cleveland, OH 44122 | When was the debt incurred? | Opened 05/18 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | IGOUL AS UNUIN CIAIUS | | |
| s the claim subject to offset? | Debts to pension or profit-sharin | n plans, and other similar debts | |

| Michigan First Cu | Last 4 digits of account number | 0002 | \$0. |
|---|---|--|----------|
| Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ0. |
| 27000 Evergreen Rd Southfield, MI 48076 | When was the debt incurred? | Opened 05/17 Last Active 12/27/18 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | Continuent | | |
| | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | Student loans | r claiiii. | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other Specify Unsecured | | |
| Michigan First Cu | Last 4 digits of account number | 0001 | \$0. |
| Nonpriority Creditor's Name | | | <u> </u> |
| 27000 Evergreen Rd Southfield, MI 48076 | When was the debt incurred? | Opened 07/16 Last Active 6/09/17 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | | |
| Midland Funding | Last 4 digits of account number | 1455 | \$662. |
| Nonpriority Creditor's Name 320 East Big Beaver Troy, MI 48083 | When was the debt incurred? | Opened 08/18 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Factoring C | Company Account Credit One | |

| Vernon Nichols | | Case number (if known) | |
|--|---|---|-----------|
| Midland Funding | Last 4 digits of account number | 8170 | \$4,095.0 |
| Nonpriority Creditor's Name 850 Camino De La Reina S San Diego, CA 92108 | When was the debt incurred? | 2016 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| ☐ Check if this claim is for a community | Student loans | | |
| lebt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify credit card debt purchased by a factor at a discount from cap One | | |
| Navient Solutions Inc | Last 4 digits of account number | 0427 | \$0.0 |
| Nonpriority Creditor's Name Po Box 9500 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 4/27/10 Last Active 10/12/10 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | • | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| lebt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| □Yes | Other. Specify | | |
| | Educationa | al | |
| Navient Solutions Inc | Last 4 digits of account number | 0302 | \$0.0 |
| Po Box 9500 | When was the debt incurred? | Opened 3/02/10 Last Active 10/12/10 | |
| Wilkes Barre, PA 18773 Jumber Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| lebt s the claim subject to offset? | | | |
| | | ng plans, and other similar debts | |

| Nandatnamital Davil-11- | | 0702 | *** | |
|--|--|---|--------|--|
| Nordstrom/td Bank Usa Nonpriority Creditor's Name | Last 4 digits of account number | 8782 | \$386. | |
| 13531 E. Caley Ave Englewood, CO 80111 | When was the debt incurred? | Opened 08/17 Last Active 9/16/19 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| Yes | Other. Specify Credit Card | <u> </u> | | |
| St. John Providence Hospital | Last 4 digits of account number | 4631 | \$288 | |
| Nonpriority Creditor's Name 22101 Moross | When was the debt incurred? | 2018 | | |
| Grosse Pointe, MI 48236 Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | |
| Who incurred the debt? Check one. | • | , | | |
| Debtor 1 only | ☐ Contingent ☐ Unliquidated | | | |
| ☐ Debtor 2 only | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| Yes | Other. Specify Medical car | re | | |
| Syncb/lowes | Last 4 digits of account number | 2784 | \$753. | |
| Nonpriority Creditor's Name | _ | | | |
| Po Box 956005 Orlando, FL 32896 | When was the debt incurred? | Opened 09/17 Last Active 9/28/18 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| ☐ Debtor 2 only | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | |
| Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| ☐ Yes | ■ Other. Specify Charge Acc | count | | |

| Last 4 digits of account number | 1125 | \$803.0 | | | | | |
|---|--|---|--|--|--|--|--|
| When was the debt incurred? | Opened 12/17 Last Active 5/28/19 | | | | | | |
| As of the date you file, the claim i | s: Check all that apply | | | | | | |
| ☐ Contingent | | | | | | | |
| ☐ Unliquidated | - | | | | | | |
| ☐ Disputed | | | | | | | |
| <u></u> | I claim: | | | | | | |
| Student loans | | | | | | | |
| ☐ Obligations arising out of a sepa report as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| Debts to pension or profit-sharin | g plans, and other similar debts | | | | | | |
| Other. Specify Charge Acc | count | | | | | | |
| Last 4 digits of account number | 6261 | \$0.0 | | | | | |
| _ | Opened 1/19/09 Lest Active | | | | | | |
| When was the debt incurred? | 12/29/10 | | | | | | |
| As of the date you file, the claim i | | | | | | | |
| ☐ Contingent | | | | | | | |
| ☐ Unliquidated | | | | | | | |
| ☐ Disputed | | | | | | | |
| Type of NONPRIORITY unsecured claim: | | | | | | | |
| Student loans | | | | | | | |
| | | | | | | | |
| <u></u> | | | | | | | |
| · | | | | | | | |
| Last 4 digits of account number | 6032 | \$7,421.0 | | | | | |
| - Laor - argino or account maniber | | Ţ.,. = | | | | | |
| When was the debt incurred? | Opened 10/13 Last Active 6/09/19 | | | | | | |
| As of the date you file, the claim i | s: Check all that apply | | | | | | |
| ☐ Contingent | | | | | | | |
| ☐ Unliquidated | | | | | | | |
| ☐ Disputed | | | | | | | |
| Type of NONPRIORITY unsecured | l claim: | | | | | | |
| Student loans | | | | | | | |
| ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | | | |
| | ration agreement or divorce that you did not | | | | | | |
| ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin | · | | | | | | |
| | When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Cother. Specify Charge Account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Unliquidated Contingent Unliquidated Disputed Contingent Unliquidated Disputed | When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Charge Account Last 4 digits of account number When was the debt incurred? Opened 1/18/08 Last Active 12/29/10 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Charge Account Last 4 digits of account number Other. Specify Charge Account Last 4 digits of account number Opened 10/13 Last Active 6/09/19 As of the date you file, the claim is: Check all that apply Contingent Unliquidated | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

| Vernon Nichols | | Case number (if known) | | | |
|--|---|---|-----------|--|--|
| J S Dept Of Ed/GsI/Atl | Last 4 digits of account number | 6044 | \$7,409.0 | | |
| Nonpriority Creditor's Name Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 10/14 Last Active 6/09/19 | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | | | | |
| Who incurred the debt? Check one. | Пол | | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | |
| At least one of the debtors and another | Student loans | d Glaini. | | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | _ | aration agreement or divorce that you did not | | | |
| No | Debts to pension or profit-sharin | og plans, and other similar debts | | | |
| | | ig plans, and other similal debts | | | |
| Yes | ☐ Other. Specify | NI . | | | |
| | Educationa | 11 | | | |
| J S Dept Of Ed/GsI/AtI Nonpriority Creditor's Name | Last 4 digits of account number | 3757 | \$6,433.0 | | |
| Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 01/12 Last Active 6/09/19 | | | |
| Number Street City State Zip Code Nho incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: Student loans | | | | |
| ☐ Check if this claim is for a community | | | | | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | | | |
| ☐ Yes | Other. Specify | | | | |
| | Educationa | al | | | |
| J S Dept Of Ed/Gsl/Atl | Last 4 digits of account number | 6068 | \$5,272.0 | | |
| Nonpriority Creditor's Name Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 10/14 Last Active 6/09/19 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| _ | ☐ Disputed | | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of trotti taloual i anocoure | | | | |
| At least one of the debtors and another | Student loans | | | | |
| _ | Student loans | aration agreement or divorce that you did not | | | |
| ☐ At least one of the debtors and another☐ Check if this claim is for a community debt | ■ Student loans □ Obligations arising out of a sepa | | | | |

| that apply |
|---|
| that apply ment or divorce that you did not other similar debts \$5,144.00 10/12 Last Active that apply |
| that apply ment or divorce that you did not other similar debts \$5,144.00 10/12 Last Active that apply |
| nent or divorce that you did not other similar debts \$5,144.00 10/12 Last Active that apply |
| \$5,144.00 10/12 Last Active that apply |
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| |
| nent or divorce that you did not |
| other similar debts |
| |
| |
| \$4,601.00 |
| 01/10 Last Active |
| that apply |
| |
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| |
| |
| |
| |
| nent or divorce that you did not |
| I 1 |

Schedule E/F: Creditors Who Have Unsecured Claims

| U S Dept Of Ed/Gsl/Atl | Last 4 digits of account number | 3750 | \$3,954.00 | | | |
|--|---|---|------------|--|--|--|
| Nonpriority Creditor's Name | _ | Opened 10/11 Last Active | | | | |
| Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | 6/09/19 | | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | Disputed | | | | | |
| At least one of the debtors and another | <u></u> ' | Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community debt | Student loans | | | | | |
| Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | | |
| No | g plans, and other similar debts | | | | | |
| ☐ Yes | Other. Specify | | | | | |
| | Educationa | ıl | | | | |
| U S Dept Of Ed/GsI/AtI Nonpriority Creditor's Name | Last 4 digits of account number | 3773 | \$3,273.00 | | | |
| Po Box 5609 | | Opened 10/11 Last Active | | | | |
| Greenville, TX 75403 | When was the debt incurred? | 6/09/19 | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| ☐ Yes | ☐ Other. Specify | | | | | |
| | Educationa | ıl | | | | |
| U S Dept Of Ed/Gsl/Atl | Last 4 digits of account number | 6064 | \$2,281.00 | | | |
| Nonpriority Creditor's Name Po Box 5609 | When was the debt incurred? | Opened 01/13 Last Active 6/09/19 | | | | |
| Greenville, TX 75403 Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | 7.5 or the date you me, the claim i | Oncox all trial apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| ☐ Yes | | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

| Vernon Nichols | | Case number (if known) | | | | | |
|--|---|--|-----------|--|--|--|--|
| U S Dept Of Ed/GsI/AtI Nonpriority Creditor's Name | Last 4 digits of account number | 3791 | \$2,191.0 | | | | |
| Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 04/11 Last Active 6/09/19 | | | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | | | | | | |
| Who incurred the debt? Check one. | Contingent | | | | | | |
| Debtor 1 only | ☐ Contingent ☐ Unliquidated | | | | | | |
| Debtor 2 only | ☐ Disputed | | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| ☐ At least one or the debtors and another ☐ Check if this claim is for a community | Student loans | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| □ Yes | Other. Specify | | | | | | |
| 55 | Educationa | ıl | | | | | |
| U S Dept Of Ed/Gsl/Atl | Last 4 digits of account number | 6087 | \$1,449.0 | | | | |
| Nonpriority Creditor's Name Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 04/10 Last Active 6/09/19 | | | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| At least one of the debtors and another | _ | Type of NONPRIORITY unsecured claim: | | | | | |
| ☐ Check if this claim is for a community debt | ■ Student loans□ Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| ls the claim subject to offset? | report as priority claims | | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| ☐ Yes | Other. Specify | | | | | | |
| | Educationa | ıl | | | | | |
| U S Dept Of Ed/GsI/AtI Nonpriority Creditor's Name | Last 4 digits of account number | 3764 | \$1,367.0 | | | | |
| Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 11/10 Last Active 6/09/19 | | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | Disputed | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| Check if this claim is for a community | Student loans | | | | | | |
| debt Is the claim subject to offset? — | report as priority claims | ration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| ☐ Yes | Other. Specify | | | | | | |

| Debtor 1 Vernon Nichols | | Case number (if known) | | | | | |
|---------------------------------|---|---|---|---------------------------|--|--|--|
| 4.5 8 | U S Dept Of Ed/Gsl/Atl | Last 4 digits of account number | 3780 | \$1,129.00 | | | |
| | Nonpriority Creditor's Name Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | Opened 04/12 Last Active 6/09/19 | _ | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | _ | ☐ Unliquidated | | | | | |
| | Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | _ | Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharir | ng plans, and other similar debts | | | | |
| | □ Yes | Other. Specify | | | | | |
| | Li Tes | Educationa | nl | - | | | |
| | | Ludcationa | 41 | | | | |
| 4.5 9 | U S Dept Of Ed/GsI/AtI Nonpriority Creditor's Name | Last 4 digits of account number | 6075 | \$102.00 | | | |
| | | | Opened 11/10 Last Active | | | | |
| | Po Box 5609 Greenville, TX 75403 | When was the debt incurred? | 6/09/19 | - | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ■ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Yes | Other. Specify | | | | | |
| Part : | 3: List Others to Be Notified About a Do | | • | | | | |
| i. Use is tr have noti | this page only if you have others to be notified ying to collect from you for a debt you owe to s e more than one creditor for any of the debts th fied for any debts in Parts 1 or 2, do not fill out | about your bankruptcy, for a debt that your bankruptcy, for a debt that your bankruptcy, for a debt that your listed in Parts 1 or 2, list the addion submit this page. | Parts 1 or 2, then list the collection agencitional creditors here. If you do not have ad | y here. Similarly, if you | | | |
| | and Address ol Systems | On which entry in Part 1 or Part 2 did you Line 4.41 of (<i>Check one</i>): | list the original creditor? Part 1: Creditors with Priority Unsecured Cla | ime | | | |
| | Box 21625 | / | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Colu | ımbia, SC 29221-1625 | Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number | | | | | |
| | | | | | | | |
| | and Address rney General of the State of | On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): | | • | | | |
| Mich | • | ' | Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured | | | | |
| 3030 | ections & Tax Enforcement Div.) W. Grand Blvd., #10-200 oit, MI 48202 | _ | a ran 2. Steulors war nonphonly onsecured | Ciairis | | | |
| - 611 | OII, IVII 70202 | Last 4 digits of account number | | | | | |
| City Attn | and Address of Detroit Law Dept. : Tax & Revenue Collection Woodward Ave., #1650 oit. MI 48226 | | list the original creditor? Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured | | | | |
| Detroit, MI 48226 | | Last 4 digits of account number | | | | | |

| Debtor 1 Vernon Nichols | | Case number (if known) | | |
|--|--|--|--|--|
| Name and Address Concentra Michigan 2630 E. Jefferson Detroit, MI 48207 | On which entry in Part 1 or Part 2 Line 4.5 of (<i>Check one</i>): | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | Last 4 digits of account number | | | |
| Name and Address Mary Jane M. Elliott, Esq. 24300 Karim Blvd. Novi, MI 48375 | On which entry in Part 1 or Part 2 Line 4.36 of (<i>Check one</i>): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Name and Address Paul Ingber. Esq 3000 Town Center, Ste 2390 Southfield, MI 48075 | On which entry in Part 1 or Part 2 Line 4.6 of (<i>Check one</i>): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Name and Address State of Michigan Department of Treasury Office of Collection s PO Box 30149 Detroit, MI 48277-0929 | On which entry in Part 1 or Part 2 Line 2.1 of (<i>Check one</i>): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Name and Address Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100 | On which entry in Part 1 or Part 2 Line 4.7 of (Check one): Last 4 digits of account number | did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|--|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 1,344.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 1,344.00 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 57,261.00 |
| claims | 0- | Obligation minimum and of a comment of a comment of the comment of | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 29,775.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 87,036.00 |

| Fill in this inform | Fill in this information to identify your case: | | | | | | |
|--|---|-------------|-----------|--|--------------------------------------|--|--|
| Debtor 1 | Vernon Nichols | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN | | | | | | | |
| Case number _ | | | | | Chaolait this is an | | |
| (II KIIOWII) | | | | | ☐ Check if this is an amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | . | | | | Out on health and a second and health from |
|-----|-----------|--------------|---|----------|--|
| | Person or | Name, Number | whom you have the r, Street, City, State and ZIP | Code | State what the contract or lease is for |
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | , | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.5 | • | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |

| Fill in this | information to identify your | case: | | |
|---|--|---|---|--|
| Debtor 1 | Vernon Nichols | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | |
| United Stat | tes Bankruptcy Court for the: | EASTERN DISTRICT OF | - MICHIGAN | |
| United Stat | les bankruptcy Court for the. | LASTERN DISTRICT OF | WICHIGAN | |
| Case numb | ber | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | amended ming |
| Official | l Form 106H | | | |
| Sched | lule H: Your Cod | lebtors | | 12/15 |
| | | | | |
| people are fill it out, and your name | filing together, both are equ | ally responsible for supple boxes on the left. Attach). Answer every question. | ying correct information the Additional Page to | complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write as a codebtor. |
| ■ No | | | | |
| ■ No □ Yes | • | | | |
| | | | | |
| | h in the last 8 years, have yo a, California, Idaho, Louisiana | | | ? (Community property states and territories include notion, and Wisconsin.) |
| 7112011 | a, Camornia, Idano, Ecalolaria | , rievada, riew iviexioo, r de | rto rtioo, rexao, wasiiii | gion, and wisconsin.) |
| ■ No. | Go to line 3. | | | |
| ☐ Yes | a. Did your spouse, former spo | use, or legal equivalent live | with you at the time? | |
| | | | | |
| | □ No | | | |
| | ☐ Yes. | | | |
| | In which community stat | e or territory did you live? | | . Fill in the name and current address of that person. |
| | | | | |
| | City | State | Zip Code | |
| in line Form out Co | 2 again as a codebtor only | if that person is a guarante | or or cosigner. Make s | f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Officia is G). Use Schedule D, Schedule E/F, or Schedule G to fill Column 2: The creditor to whom you owe the debt |
| | Name, Number, Street, City, State and Z | IP Code | | Check all schedules that apply: |
| 3.1 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| Ī | Number Street | | | - |
| (| City | State | ZIP Code | |
| | | | | |
| 3.2 | Neme | | | Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | 2 | | - |
| (| City | State | ZIP Code | |

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-57238-pjs Doc 1 Filed 12/09/19 Entered 12/09/19 16:56:32 Page 46 of 72

| Fill | in this information to ident | tify your ca | se: | | | | | | | |
|--------------------|--|---|--|--|--|---------------|--|-----------------------|--------------------------------|-----------------|
| Del | otor 1 Verr | non Nich | ols | | | _ | | | | |
| | otor 2 | | | | | _ | | | | |
| Uni | ted States Bankruptcy Co | urt for the: | EASTERN DISTRICT | OF MICHIGAN | | _ | | | | |
| | se number | | | | Check if this is: An amended filing A supplement showing postpet 13 income as of the following designation. | | | | | |
| 0 | fficial Form 106 | <u>31</u> | | | | | MM / DD/ Y | YYY | | |
| S | chedule I: You | ır Inco | me | | | | | | | 12/15 |
| sup spo atta | as complete and accurated plying correct information use. If you are separated that a separate sheet to the transfer of transfer o | on. If you a d and your nis form. C | are married and not filing spouse is not filing with | ig jointly, and your th you, do not inclu | spouse i de inforr | s liv nati | ing with you, incluence in the incluence | ude info use. If n | rmation about nore space is | your needed, |
| 1. | Fill in your employmer information. | nt | | Debtor 1 | | | Debtor 2 | filing spouse | | |
| | If you have more than one job, attach a separate page with information about additional employers. | | ■ Employed | ■ Employed | | | | | | |
| | | Employment status | ☐ Not employed | | | ☐ Not e | mployed | | | |
| | | | Occupation | sanitizer | | | | | | |
| | Include part-time, seaso self-employed work. | onal, or | Employer's name | Great Lakes Coca-Cola | | | | | | |
| | Occupation may include or homemaker, if it appli | | Employer's address | 6250 North rive 9000 Rosemont, IL 6 | · | Ste | | | | |
| | | | How long employed th | nere? 7 years | i | | | | | |
| Par | t 2: Give Details A | bout Mon | thly Income | | | | | | | |
| | mate monthly income as use unless you are separa | | te you file this form. If y | ou have nothing to r | eport for a | any | line, write \$0 in the | space. lı | nclude your nor | n-filing |
| | ou or your non-filing spouse e space, attach a separate | | | mbine the informatio | n for all e | mple | oyers for that perso | n on the | lines below. If y | you need |
| | | | | | | | For Debtor 1 | | ebtor 2 or iling spouse | |
| 2. | , 0 | | y, and commissions (be alculate what the monthly | | 2. | \$ | 3,965.00 | \$ | N/A | |
| 3. | Estimate and list mont | thly overti | ne pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Incom | ie. Add line | e 2 + line 3. | | 4. | \$ | 3,965.00 | \$_ | N/A | |
| | | | | | | | | | | |

Debtor 1 Vernon Nichols Case number (if known)

| | | | | For | Debtor 1 | | Debtor 2 or -filing spouse | | |
|-----|--|---|---------|--------|----------------|--------|-------------------------------|----------|--|
| | Copy | line 4 here | 4. | \$ | 3,965.00 | \$ | N/A | | |
| 5. | List a | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 827.67 | \$ | N/A | | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 325.00 | \$ | N/A | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | | |
| | 5g. | Union dues | 5g. | \$ | 60.67 | \$ | N/A | | |
| | 5h. | Other deductions. Specify: | _ 5h.+ | \$ | 0.00 | + \$ | N/A | | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,213.34 | \$ | N/A | | |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,751.66 | \$ | N/A | | |
| 8. | List a 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | ob. | Ψ | 0.00 | Ψ | IV/A | | |
| | | settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | N/A | | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | | |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | \$ | 0.00 | + \$ | N/A | | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | | |
| 10. | | • | 10. \$ | 2 | 2,751.66 + \$_ | | N/A = \$ 2 | 2,751.66 | |
| 11. | Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The res that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | 12. \$ 2 | 2,751.66 | |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | ? | | | | Combine monthly i | | |
| | | No. | | | | | | | |
| | | Yes. Explain: | | | | | | | |

| Fill | in this informa | ation to identify yo | our case: | | | | | |
|------|-------------------------------|---|---------------------------|--|--|------------------|---|--|
| Deb | otor 1 | Vernon Nich | ols | | | Chec | k if this is: | |
| | otor 2 | | | | | | An amended filing A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| Unit | ed States Bank | ruptcy Court for the | EASTE | RN DISTRICT OF MICHI | GAN | | MM / DD / YYYY | |
| | e numbe r nown) | | | | | | | |
| | | orm 106J | | | | | | |
| Be | as complete ormation. If m | | s possible. eded, atta | If two married people a ch another sheet to this | | | | |
| Par | t 1: Desci | ribe Your House | ehold | | | | | |
| 1. | ■ No. Go to | o line 2. es Debtor 2 live | • | ate household? al Form 106J-2, <i>Expense</i> | s for Separate House | ehold of Debt | or 2. | |
| 2. | | e dependents? | | . , | • | | | |
| | Do not list D Debtor 2. | On not list Debtor 1 and Yes. Fill out this information for | | | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state dependents | | | | Son | | 5 | ■ No □ Yes |
| | | | | | Daughter | | | □ No ■ Yes □ No |
| | | | | | | | | ☐ Yes ☐ No ☐ Yes |
| 3. | expenses o | penses include If people other t d your depende | han 🗖 | No Yes | | | | 163 |
| exp | imate your ex | a date after the | our bankrı | uptcy filing date unless | | | | pter 13 case to report f the form and fill in the |
| the | | h assistance an | | government assistance cluded it on <i>Schedule I:</i> | | | Your expe | enses |
| 4. | | or home owners | | ses for your residence. r lot. | Include first mortgage | e 4. \$ | | 450.00 |
| | If not include | ded in line 4: | | | | | | |
| | | estate taxes erty, homeowner' | s, or renter | 's insurance | | 4a. \$ 4b. \$ | | 0.00 |
| | 4c. Home | maintenance, re | epair, and ι | ıpkeep expenses | | 4c. \$ | | 0.00 |
| 5. | | eowner's associa mortgage paym | | our residence, such as h | ome equity loans | 4d. \$ 5. \$ | | 0.00 0.00 |

Official Form 106J Schedule J: Your Expenses 19-57238-pjs Doc 1 Filed 12/09/19 Entered 12/09/19 16:56:32 Page 49 of 72

| 4. | For example, do yo | Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | | | | | | |
|----|--------------------|---|--|--|--|--|--|--|
| | ■ No. | | | | | | | |
| | ☐ Yes. | Explain here: | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

page 2

| Debtor 1 | | case: | | | |
|--|--|---------------------------|--------------------------------|---|---------------|
| 20010 | Vernon Nichols | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this is ar amended filing | ı |
| If two married po | eople are filing together | r, both are equally respo | | information. king a false statement, concealing property | 12/15 , or |
| | 8 U.S.C. §§ 152, 1341, 1 | | kruptcy case can result in fin | es up to \$250,000, or imprisonment for up | to 20 |
| years, or both. 1 | | | kruptcy case can result in fin | es up to \$250,000, or imprisonment for up t | to 20 |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | kruptcy case can result in fin | | to 20 |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | | to 20 |
| Sign Did you pa | 8 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | rney to help you fill out bank | | otice, |
| Did you pa No Yes. N | n Below ny or agree to pay some Name of person | 519, and 3571. | rney to help you fill out bank | ruptcy forms? Attach Bankruptcy Petition Preparer's Non- Declaration, and Signature (Official Form | otice, |
| Did you pa No Yes. N Under penathat they are | n Below ny or agree to pay some Name of person | 519, and 3571. | rney to help you fill out bank | ruptcy forms? Attach Bankruptcy Petition Preparer's Non- Declaration, and Signature (Official Form | otice, |
| Did you pa No Yes. N Under pena that they are Vernor | n Below ny or agree to pay some Name of person alty of perjury, I declare the true and correct. | 519, and 3571. | rney to help you fill out bank | ruptcy forms? Attach Bankruptcy Petition Preparer's Non- Declaration, and Signature (Official Form | otice, |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill | in this inform | nation to identify you | r case: | | | |
|---|----------------------------|----------------------------------|---|------------------------------------|--|------------------------------------|
| De | btor 1 | Vernon Nichols | | | | |
| Da | htor O | First Name | Middle Name | Last Name | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Ba | nkruptcy Court for the: | EASTERN DISTRICT OF | MICHIGAN | | |
| Ca | se number | | | | | |
| | nown) | | | | _ | Check if this is an |
| | | | | | a | mended filing |
| ~ | · · · · · · | 4.07 | | | | |
| | ficial Fo | | Affaina fan Indiini | luala Filipa fan D | | |
| | | | Affairs for Individ | | | 4/19 |
| | | | | | equally responsible for sup additional pages, write you | |
| | | n). Answer every que | | | , audinonai pagos, inito jos | |
| Pa | rt 1: Give D | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. What is your current marital status? | | | | | | |
| | ☐ Married | | | | | |
| | ■ Not mar | | | | | |
| _ | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than v | where you live now? | | |
| | ■ No | | | | | |
| | ☐ Yes. Lis | t all of the places you I | lived in the last 3 years. Do no | ot include where you live now | <i>1</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Address: | | Dates Debtor 2 lived there |
| 3. | | | | | ity property state or territory | |
| stat | es and territori | ies include Arizona, Ca | lifornia, Idaho, Louisiana, Nev | vada, New Mexico, Puerto R | ico, Texas, Washington and V | /isconsin.) |
| | ■ No | | | | | |
| | ☐ Yes. Ma | ake sure you fill out <i>Scl</i> | hedule H: Your Codebtors (Of | fficial Form 106H). | | |
| Pa | t 2 Explai | in the Sources of You | ır Income | | | |
| . « | | | | | | |
| 4. | | | mployment or from operating to received from all jobs and a | | ear or the two previous cale | ndar years? |
| | | | have income that you receive | | | |
| | □ No | | | | | |
| | _ | I in the details. | | | | |
| | | | Dobton 4 | | Dahtan 0 | |
| | | | Debtor 1 Sources of income | Gross income | Debtor 2 Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| Fre | om January 1 | of current year until | ■ \A/ | \$50,927.00 | □ Wages commissions | , |
| | | d for bankruptcy: | Wages, commissions, bonuses, tips | ψ30,321.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| De | ebtor 1 | Ve | rnor | Nich | ols | | Case | Case number (if known) | | |
|----|---|--|----------------|---------|--------------------------|---|---|--|---|--|
| | | | | | | | | | | |
| | | | | | | Debtor 1 | | Debtor 2 | | |
| | | | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | |
| | r last o | | | | 31, 2018) | ■ Wages, commissions, bonuses, tips | \$48,522.00 | ☐ Wages, commissions, bonuses, tips | | |
| | | | | | | ☐ Operating a business | | ☐ Operating a business | | |
| | | | | | fore that: 31, 2017) | ■ Wages, commissions, bonuses, tips | \$44,274.00 | ☐ Wages, commissions, bonuses, tips | | |
| | | | | | | ☐ Operating a business | ☐ Operating a business | | | |
| | winni List e | ngs. Ì ach s No | f you sourc | are fil | ng a joint ca | pensions; rental income; interse and you have income that youne from each source separa | you received together, list it o | only once under Debtor 1. | and gambling and lottery | |
| | | | | | | Debtor 1 | | Debtor 2 | | |
| | | | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | |
| | r last o anuary | | | | 31, 2018) | 401K Withdrawal | \$13,755.00 | | | |
| Pa | rt 3: | List | Cert | ain Pa | yments You | Made Before You Filed for | Bankruptcy | | | |
| 6. | _ | either No. | Nei | ther D | ebtor 1 nor I | e's debts primarily consume Debtor 2 has primarily consumants personal, family, or househo | u <mark>mer debts.</mark> Consumer debts | s are defined in 11 U.S.C. § | 101(8) as "incurred by an | |
| | | | | | 90 days befo | ore you filed for bankruptcy, di | id you pay any creditor a tota | I of \$6,825* or more? | | |
| | | | | No. | Go to line 7 | | | | | |
| | ☐ Yes List below each creditor to whom you paid a total paid that creditor. Do not include payments for do not include payments to an attorney for this bank. | | | | | | nts for domestic support oblig his bankruptcy case. | ations, such as child suppor | t and alimony. Also, do | |
| | * Subject to adjustment on 4/01/22 and every 3 year | | | | | | s after that for cases filed on | or after the date of adjustme | ent. | |
| | | Yes. Debtor 1 or Debtor 2 o During the 90 days before | | | | or both have primarily consure you filed for bankruptcy, di | | I of \$600 or more? | | |
| | | | | No. | Go to line | 7. | | | | |
| | | | | Yes | include pay | each creditor to whom you pai /ments for domestic support o r this bankruptcy case. | | | | |
| | | | | | | | | | | |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 3

Explain what happened

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| Deb | btor 1 Vernon Nichols | Case number | · (if known) | | | | | | |
|-----|---|--|---|--|--|--|--|--|--|
| | | | | | | | | | |
| | accounts or refuse to make a payment bec | ause you owed a debt? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Creditor Name and Address | Describe the action the creditor took | Date action was Amount taken | | | | | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a | cy, was any of your property in the possession of an nother official? | assignee for the benefit of creditors, a | | | | | | |
| | ☐ Yes | | | | | | | | |
| Par | rt 5: List Certain Gifts and Contributions | | | | | | | | |
| 13. | ■ No | etcy, did you give any gifts with a total value of more | than \$600 per person? | | | | | | |
| | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave Value | | | | | | |
| | per person | Describe the girts | the gifts | | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | |
| 14. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cor | etcy, did you give any gifts or contributions with a tot | al value of more than \$600 to any charity? | | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | al Describe what you contributed | Dates you Value contributed | | | | | | |
| Par | rt 6: List Certain Losses | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? | | | | | | | | |
| | ■ No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | how the loce ecourred | escribe any insurance coverage for the loss | Date of your Value of property loss lost | | | | | | |
| | II. | nclude the amount that insurance has paid. List pending issurance claims on line 33 of <i>Schedule A/B: Property</i> . | | | | | | | |
| Par | rt 7: List Certain Payments or Transfers | | | | | | | | |
| 16. | consulted about seeking bankruptcy or pr | cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services require | | | | | | | |
| | □ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | Description and value of any property transferred | Date payment Amount of or transfer was payment made | | | | | | |
| | Access Counseling 633 W. 5th Streer Los Angeles, CA 90071 | | 11/22/19 \$8.95 | | | | | | |

Official Form 107

Debtor 1 Vernon Nichols Case number (if known)

| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred transferred transferred | | Date payment or transfer was made | Amount of payment | | | | | |
|-----|--|--|---|---|---|---|--|--|--|
| | Jack Berman & Associates, P.C. 19500 Middlebelt Suite 100W Livonia, MI 48152 | | | | 11/26/19 | \$630.00 | | | |
| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No Yes. Fill in the details. | or to make payments | | | or transfer any prope | rty to anyone who | | | |
| | Person Who Was Paid Address | Description and v | alue of any prop | perty | Date payment or transfer was made | Amount of payment | | | |
| 18 | Within 2 years before you filed for bankruptcy | did you sell trade o | or otherwise tran | sfer any nroi | nerty to anyone other | r than property | | | |
| 10. | transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already linear No. Yes. Fill in the details. | iness or financial affa e as security (such as t | nirs? he granting of a s | | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | | | any property or s received or debts schange | Date transfer was made | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Date Transfer was made | | | | | | | |
| Par | t 8: List of Certain Financial Accounts, Instr | uments, Safe Deposit | Boxes, and Sto | orage Units | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, | were any financial ac | counts or instru | ıments held iı | n your name, or for yo | our benefit, closed, | | | |
| | sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No | other financial accou ations, and other finar | nts; certificates ncial institutions | of deposit; sl | hares in banks, credit | unions, brokerage | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | | ast 4 digits of account number | Type of account instrument | clo | ate account was osed, sold, oved, or ansferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed for | bankruptcy, an | y safe deposi | it box or other deposi | tory for securities, | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | | contents | Do you still have it? | | | |
| | | | | | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Vernon Nichols Case number (if known)

| 00 | | | land of the desired by the second by the sec | 4 | | | | | | | | |
|--------|--|--|--|-------|-------------------------------------|-----------------------|--|--|--|--|--|--|
| 22. | Have | e you stored property in a storage unit or p | lace other than your home within 1 | 1 yea | ar before you filed for bankruptcy? | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | | | |
| | | ne of Storage Facility dress (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | De | escribe the contents | Do you still have it? | | | | | | |
| Par | t 9: | Identify Property You Hold or Control for | · | | | | | | | | | |
| | | o you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust | | | | | | | | | | |
| | | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | | | |
| | | ner's Name dress (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | escribe the property | Value | | | | | | |
| Par | t 10: | Give Details About Environmental Inform | ation | | | | | | | | | |
| For | the p | urpose of Part 10, the following definitions | apply: | | | | | | | | | |
| | toxic | ironmental law means any federal, state, or c substances, wastes, or material into the a llations controlling the cleanup of these su | nir, land, soil, surface water, ground | | | | | | | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | | | | | | |
| | Haza | ardous material means anything an environ ardous material, pollutant, contaminant, or | mental law defines as a hazardous | s wa | aste, hazardous substance, toxic su | ubstance, | | | | | | |
| Rep | ort al | Il notices, releases, and proceedings that yo | ou know about, regardless of whe | n the | ey occurred. | | | | | | | |
| 24. | Has | any governmental unit notified you that yo | u may be liable or potentially liable | e un | der or in violation of an environme | ntal law? | | | | | | |
| | | ■ No | | | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | | | |
| | | ne of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | nd | Environmental law, if you know it | Date of notice | | | | | | |
| 25. | Have | e you notified any governmental unit of any | release of hazardous material? | | | | | | | | | |
| | = | No | | | | | | | | | | |
| | ∐ Nar | Yes. Fill in the details. ne of site | Governmental unit | | Environmental law, if you | Date of notice | | | | | | |
| | | dress (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State an ZIP Code) | nd | know it | Date of Hotice | | | | | | |
| 26. | Have | e you been a party in any judicial or admini | strative proceeding under any envi | iron | mental law? Include settlements a | nd orders. | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | | | | | |
| Par | t 11: | Give Details About Your Business or Con | nnections to Any Business | | | | | | | | | |
| 27. | With | nin 4 years before you filed for bankruptcy, | did you own a business or have ar | ny o | f the following connections to any | business? | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | | | | |
| | | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | nip (| LLP) | | | | | | | |
| Offici | al For | m 107 Statement | of Financial Affairs for Individuals Filing | a for | Bankruptcv | page | | | | | | |

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| Deb | otor 1 | Vernon Nichols | | Cas | e number (if known) | | | | |
|--|--|--|--|-------|---|--|--|--|--|
| | | | | | | | | | |
| | | A manting in a manting matrix | | | | | | | |
| | | A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing exc | ecutive of a corporation | | | | | | |
| | | An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | | |
| | | No. None of the above applies. Go to Part 12. | | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | |
| | Add | siness Name Iress | Describe the nature of the business | | Employer Identification number Do not include Social Security number or ITIN. | | | | |
| | (Num | nber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Dates business existed | | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include a institutions, creditors, or other parties. | | | | | yone about your business? Include all financial | | | | |
| | _ | No | | | | | | | |
| | _ | Yes. Fill in the details below. | | | | | | | |
| | | ne Iress nber, Street, City, State and ZIP Code) | Date Issued | | | | | | |
| Par | t 12: | Sign Below | | | | | | | |
| are to with 18 U | true a a ba J.S.C. Vern | | false statement, concealing property, o | r ob | eclare under penalty of perjury that the answers taining money or property by fraud in connection s, or both. | | | | |
| Sig | natur | e of Debtor 1 | | | | | | | |
| Dat | e D | December 9, 2019 | Date | | | | | | |
| Did : ■ N | lo | nttach additional pages to Your Stateme | ent of Financial Affairs for Individuals F | iling | for Bankruptcy (Official Form 107)? | | | | |
| | lo | pay or agree to pay someone who is not ame of Person Attach the Bankru | | | | | | | |

United States Bankruptcy Court Eastern District of Michigan

| In re | Verno | n Nichols | | _ | Case No. | | | | | |
|-------|--|---|--|---|---|--|--|--|--|--|
| | | | | Debtor(s) | Chapter | 7 | | | | |
| | | | | | | | | | | |
| | | | | F ATTORNEY FOR DEBTO Γ TO F.R.BANKR.P. 2016(b) | R(S) | | | | | |
| | The unc | dersigned, pursuan | t to F.R.Bankr.P. 2016(b), stat | tes that: | | | | | | |
| l. | The un | dersigned is the att | orney for the Debtor(s) in this | case. | | | | | | |
| 2. | The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one] | | | | | | | | | |
| | [X] | FLAT FEE | | | | | | | | |
| | A. | - | _ | of and in connection with this ca | | 630.00 | | | | |
| | В. | | | | | 630.00 | | | | |
| | C. | | | | <u></u> | 0.00 | | | | |
| | [] | RETAINER | ance due and payable is | | | | | | | |
| | A. | | iner received | | · · · · · | | | | | |
| | B. | | | r at an hourly rate of \$ [C penses exceeding the amount of | | urly rate schedule.] Debtor(s) have | | | | |
| 3. | \$ 0.0 | 0 of the filing for | ee has been paid. | | | | | | | |
| 1. | | \$ | | | | | | | | |
| | A. | | debtor's financial situation, an | d rendering advice to the debtor | in determining v | whether to file a petition in | | | | |
| | B. | bankruptcy; Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; | | | | | | | | |
| | C. | Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | | | | | | | |
| | D. E. | Reaffirmations; | of the debtor in adversary proc | eccaings and other contested bar | nkruptcy matters | ; | | | | |
| | F. | -Redemptions; | | | | | | | | |
| | G. | Other: | with socured eraditors to | raduca to market value: ev | omntion plant | ning; preparation and filing of | | | | |
| | | reaffirmation | | ons as needed; preparation | | motions pursuant to 11 USC | | | | |
| 5. | By agre | Representation actions or any as the attorned amount to be | on of the debtors in any d y other adversary proceed y may charge at the times | s of services rendered. Attending engaged for any of the prevention | icial lien avoic ate of \$250.00 orney is entitle | lances, relief from stay per hour, or such hourly rate ed to require a retainer, in an trated services. Attorney is | | | | |
| | | at the time of will attempt to | services rendered; The a complete attorney service | | ee in this case ee, however, c | | | | | |
| 5. | The sou A. B. | irce of payments to | the undersigned was from: Debtor(s)' earnings, wages, Other (describe, including t | compensation for services perfo | ormed | | | | | |

| | corporation, any compensation paid or to be paid ex | ccept as follows: |
|---------|---|-------------------------------------|
| Dated: | December 9, 2019 | /s/ JACK BERMAN |
| | | Attorney for the Debtor(s) |
| | | JACK BERMAN P-10737 |
| | | Berman & Bishop, PLLC |
| | | 24405 Gratiot Ave. |
| | | Eastpointe, MI 48021 |
| | | 586-779-6000 JackBerman72@gmail.com |
| Agreed: | /s/ Vernon Nichols | |
| | Vernon Nichols | |
| | Debtor | Debtor |

The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or

7.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|---------------|--------------------|---|
| \$245 | filing fee | - |
| \$75 | administrative fee | |
| <u>+</u> \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

| In re | Vernon Nichols | | Case No. | |
|---------|----------------------------------|---|--|------|
| | | Debtor(s) | Chapter 7 | |
| | VER | IFICATION OF CREDITOR | MATRIX | |
| The abo | ove-named Debtor hereby verifies | that the attached list of creditors is true and o | correct to the best of his/her knowled | lge. |
| Date: | December 9, 2019 | /s/ Vernon Nichols | | |
| | | Vernon Nichols | | |
| | | Signature of Debtor | | |

Account Services Colls 1802 Ne Loop 410 Suite 400 San Antonio, TX 78217

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Amcol Systems P.O. Box 21625 Columbia, SC 29221-1625

Atg Credit 1700 W Cortland St Chicago, IL 60622

Atg Credit 1700 W Cortland St Chicago, IL 60622

Attorney General of the State of Michiga Collections & Tax Enforcement Div. 3030 W. Grand Blvd., #10-200 Detroit, MI 48202

Baker College 1500 University Drive Auburn Hills, MI 48326

Bank Of America Po Box 982238 El Paso, TX 79998

Best Buy/cbna Po Box 6497 Sioux Falls, SD 57117

Cap1/saks 3455 Hwy 80 West Jackson, MS 39209 Capital One Po Box 30281 Salt Lake City, UT 84130

Capital One Auto Finance 3901 Dallas Parkway PO Box 259407 Plano, TX 75093

Capital One?Saks Fifth Avenue PO Box 4069 Carol Stream, IL 60197-4069

City Of Detroit Revunue Collections Unit 2 Woodward Avenue, Suite 105 Detroit, MI 48226

City of Detroit Law Dept. Attn: Tax & Revenue Collection 660 Woodward Ave., #1650 Detroit, MI 48226

Comenitybank/victoria Po Box 182789 Columbus, OH 43218

Concentra Michigan 2630 E. Jefferson Detroit, MI 48207

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Credit Union Advantage 22250 Providence Drive Southfield, MI 48075

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773 Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

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Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773 Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Dfs/webbank Po Box 81607 Austin, TX 78708

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

Dpt Ed/navi
Po Box 9635
Wilkes Barre, PA 18773

Dpt Ed/navi
Po Box 9635
Wilkes Barre, PA 18773

First Federal Credit C 24700 Chagrin Blvd Cleveland, OH 44122

First Federal Credit C 24700 Chagrin Blvd Cleveland, OH 44122

Mary Jane M. Elliott, Esq. 24300 Karim Blvd. Novi, MI 48375

Michigan First Cu 27000 Evergreen Rd Southfield, MI 48076

Michigan First Cu 27000 Evergreen Rd Southfield, MI 48076

Midland Funding 320 East Big Beaver Troy, MI 48083 Midland Funding 350 Camino De La Reina S San Diego, CA 92108

Navient Solutions Inc Po Box 9500 Wilkes Barre, PA 18773

Navient Solutions Inc Po Box 9500 Wilkes Barre, PA 18773

Nordstrom/td Bank Usa 13531 E. Caley Ave Englewood, CO 80111

Paul Ingber. Esq 3000 Town Center, Ste 2390 Southfield, MI 48075

St. John Providence Hospital 22101 Moross Grosse Pointe, MI 48236

State of Michigan Department of Treasury Office of Collection s PO Box 30149 Detroit, MI 48277-0929

Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100

Syncb/lowes Po Box 956005 Orlando, FL 32896

Syncb/pandora C/o Po Box 965036 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896 U S Dept Of Ed/Gsl/Atl Po Box 5609 Greenville, TX 75403

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